# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000011000

**Entity Name:** MCCURDY SENIOR HOUSING CORPORATION

**Current Principal  Place of Business:**

306 SW 10TH STREET
BELLE GLADE,  FL  33430

**Current Mailing Address:**

306 SW 10TH STREET
BELLE GLADE,  FL  33430

**FEI Number: 56-2423539**

**Certificate of Status Desired:**  Yes

**Name and Address of Current Registered Agent:**

GLUCKSMAN, JOSEPH S
306 SW 10TH STREET
BELLE GLADE, FL  33430  US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

SIGNATURE:

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Electronic Signature of Registered Agent                                   Date

## Officer/Director Detail :

| | | | | |
|---|---|---|---|---|
| Title | P | | Title | DT |
| Name | GLUCKSMAN, JOSEPH | | Name | CHASE, JEAN |
| Address | 306 SW 10TH STREET | | Address | 306 SW 10TH STREET |
| City-State-Zip: | BELLE GLADE  FL  33430 | | City-State-Zip: | BELLE GLADE  FL  33430 |
| Title | DIRECTOR, SECRETARY, CHAIRWOMAN | | Title | D |
| Name | BELL-SPENCE, BARBARA | | Name | QUINN, MARY |
| Address | 306 SW 10TH STREET | | Address | 306 SW 10TH STREET |
| City-State-Zip: | BELLE GLADE  FL  33430 | | City-State-Zip: | BELLE GLADE  FL  33430 |
| Title | D | | Title | VP |
| Name | NEAL, BRYAN | | Name | GLUCKSMAN, SAM  DR. |
| Address | 306 SW 10TH STREET | | Address | 306 SW 10TH STREET |
| City-State-Zip: | BELLE GLADE  FL  33430 | | City-State-Zip: | BELLE GLADE  FL  33430 |
| Title | DIRECTOR OF DEVELOPMENT, VP | | Title | VP |
| Name | WALESKY, DANIEL | | Name | SCHUSTER, MARK |
| Address | 306 SW 10TH STREET | | Address | 306 SW 10TH STREET |
| City-State-Zip: | BELLE GLADE  FL  33430 | | City-State-Zip: | BELLE GLADE  FL  33430 |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: JOSEPH GLUCKSMAN                              PRESIDENT                    02/19/2024

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Electronic Signature of Signing Officer/Director Detail                              Date